



REQUEST FOR ABSTRACT OF DRIVING RECORD

An abstract of driving record must be obtained through the Department of Licensing. This form may be used to request a copy of **your** driving record. The information contained in the driving records obtained from this Department shall be used in accordance with requirements and in no way violate the provisions of RCW 46.52.130, 28A.160.210, and 18 USC 2721.

FOR VALIDATION ONLY

106-060-421-0005

PRINT LAST NAME		FIRST NAME		MIDDLE INITIAL
WASHINGTON DRIVER LICENSE NUMBER		DATE OF BIRTH	(AREA CODE) DAYTIME TELEPHONE NUMBER	
MAILING ADDRESS				
CITY		STATE	ZIP CODE	
PURPOSE OF DRIVE RECORD. IF NONE OF THE BOXES ARE CHECKED, FORM WILL BE RETURNED.				
<input type="checkbox"/> Three-year noncommercial insurance record. <i>(Available for underwriting noncommercial motor vehicle policies.)</i>				
<input type="checkbox"/> Three-year commercial insurance record. <i>(Available to commercial employers' insurance companies for motor vehicle underwriting purposes only.)</i>				
<input type="checkbox"/> Three-year life insurance record. <i>(Available to the insurance carrier that has life insurance in effect covering you for underwriting purposes only. Contains all traffic related commercial and noncommercial convictions, violations, and collisions.)</i>				
<input type="checkbox"/> Full employment/commercial record. <i>(Available to employers or prospective employers to determine employment eligibility for commercial vehicle operation. Commercial vehicle means any vehicle the principal use of which is the transportation of commodities, merchandise, produce, freight, animals or passengers for hire. The record shows all traffic related convictions, violations, and collisions. Some convictions remain on record for more than five years.)</i>				
<input type="checkbox"/> Volunteer vanpool driver record. <i>(Available to transit authorities to determine insurance and risk management requirements necessary to drive a vanpool vehicle. The record shows all traffic related convictions, violations, and collisions. Some convictions remain on record for more than five years.)</i>				
<input type="checkbox"/> School bus driver record. <i>(Available to school districts to determine employment eligibility for school bus operation. The record shows all traffic related convictions, violations, collisions, and suspension, revocation, and disqualification actions. Some convictions remain on record for more than five years.)</i>				
<input type="checkbox"/> Complete record. <i>(Available to named individuals, attorneys, law and justice agencies, and governmental agencies. The record shows all traffic related convictions, violations, collisions, and suspension, revocation, and disqualification actions.)</i>				
X		SIGN HERE FOR VERIFICATION OF YOUR IDENTITY		
		DATE		

A fee of \$5.00 is required for each driving record requested. Fee should be in the form of a check or money order made payable to the Department of Licensing. Allow two weeks from date of mailing to receive your record. For further questions contact Customer Service at (360) 902-3900.

Please mail your request to: Department of Licensing
Driver Records
PO Box 9048
Olympia, WA 98507-9048

Your driving record will be sent to the mailing address above.

The Department of Licensing has a policy of providing equal access to its services. If you need special accommodation, call (360) 902-3900 or TTY (360) 664-0116.

TR-511-009 REQUEST FOR ADR (R/9/02)OR/W